



BRS

Training Briefs

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Your one page guide of hints, tips,
field developments, and more.

Clients with Addiction - Revised

Why we provide services to individuals with addiction

Introduction

While many VRS staff understand that clients with addictions are eligible for services, we have received many questions as to 'why?'

The Equal Employment Opportunity Commission (EEOC) states that persons addicted to drugs but who are ***no longer using*** drugs illegally are considered "individuals with disabilities" and are protected under ADA. An individual actively using drugs is not a protected class under ADA law.

VRS policy models these two principles.

Eligibility?

The EEOC gives us the definition of addiction as a disability. However, individuals must still be eligible for services. VRS' policy around eligibility (PPM 421) states a client must:

- have a documented physical or mental impairment
- the impairment is an impediment to employment
- require VRS services to get to work
- benefit from an employment outcome with VRS

A way to document eligibility for clients with addiction is by looking to severity (PPM 422). By looking at how the addiction limits certain functional capacities (cognitive and learning skills, communication, interpersonal skills, mobility, motor skills, self care, self direction, work skills, and work tolerance) in terms of an employment outcome, you will be able to better justify the eligibility determination.

How does this affect my clients?

Here are some of the important points to consider:

If the client is actively using drugs/alcohol:

- VR cannot deny anyone from giving an application, whether or not they are clean and sober.
- If a client relapses while the case is active, do not immediately close the case. The VRC should inform the client that the case will remain inactive until the client participates in a treatment program. VR currently does not pay for treatment. Give a specific timeline and make sure to document what you have done.
- If the client participates in treatment, has remained clean/sober, and can provide documentation, the case should become active again.
- If the client does not participate in prescribed treatment and you have followed closure protocol (sending letters, etc), you may close the case.
- If the client has consistent, frequent relapses (even if they go through treatment), the client is not fully benefiting from VR services and the case may be closed following closure protocol.
- If the frequency and degree of use causes a direct threat to property, health, and safety of others, the case can be closed following closure protocol.
- VR does not currently consider gambling as a disability.
- If the VRC has suspicion of relapse at any time during the case, the VRC can require screenings. **VR can pay for these screenings** on a case by case basis.

Should the client be clean/sober for 30 days to proceed with services? There is no official policy on this. Talk to your supervisor and use your best judgment.

What do I do next?

The best thing for you to do is to get to know addiction programs in your area. They are an important resource to assist you with working with this population. Most importantly, read the PPM and make sure you are abiding by policy.

One thing not mentioned here is addiction as a co-occurring disorder with mental illness. For this particular population, the rules and requirements set forth in the PPM may be hard to follow. For instance, drug relapse within this population is often a manifestation of the mental illness. So, someone with an addiction to alcohol may still drink everyday while suffering from depression. The current policy within the PPM still applies in these cases; however, please work closely with your mental health centers in these cases to ensure PPM compliance.